

Work Order ID 99966

\*99966\*

Page 1

Tuesday, April 16, 2013 3:47:58 PM

Item ID: PB67-43001-267

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Pad Attachment Assembly

Start Date: 4/16/2013 Start Qty: 10.00

\*10\*

Cust Item ID:

Required Date: 5/24/2013 Req'd Qty: 10.00

\*10\*

Customer:

Reference:

Approvals: Process Plan: *MF*

Date: *13-6-7*

Tooling:

Date:

Run Start \*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
B67-43001-267	Rev C

100

FLOW WATER JET

0.00

\*100\*

Waterjet

Memo

0.00

*10 0*

*Jm13-07-30*

FLOW CNC Waterjet

I-Cut as per Dwg B67-43001 Dwg Rev: *C* Prog Rev: *C*

*2024-032*

\*\*\*\*grain direction along 3.36" \*\*\*\*2-Deburr if necessary

110

QC2- Inspect parts off machine FAI/FAIB

0.00

\*110\*

QC

Memo

0.00

*10 0*

*Jm13-07-30*

Quality Control

120

QC8- Inspect parts - second check

0.00

\*120\*

QC

Memo

0.00

*(10) 13-07-30*

*DAS  
09  
0-88*

Quality Control

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

**Work Order ID 99966****\*99966\***

Page 2

Tuesday, April 16, 2013 3:47:58 PM

Item ID: PB67-43001-267

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Pad Attachment Assembly

Start Date: 4/16/2013 Start Qty: 10.00

**\*10\***

Cust Item ID:

Required Date: 5/24/2013 Req'd Qty: 10.00

**\*10\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

0.00

**\*130\***

NC BRAKE

Brake NC

Memo

0.00

Brake NC

Bend as per Dwg B67-43001

10

8/13/07/31

140

0.00

**\*140\***

QC5- Inspect part completeness to step on W/O

QC

Memo

0.00

Quality Control

13-01-31 PD

150

0.00

**\*150\***

Chemical Conversion Coat per QSI005 4.1

HandFinish

Memo

0.00

Hand Finishing

10 26 13-7-31

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

# Work Order ID 99966

\*99966\*

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Tuesday, April 16, 2013 3:47:58 PM

Item ID: PB67-43001-267

Accept

\*N9000040100\*

Setup Start

\*NS1\*

Revision ID:

Item Name: Pad Attachment Assembly

Stop

\*NS2\*

Start Date: 4/16/2013 Start Qty: 10.00

\*10\*

Cust Item ID:

Required Date: 5/24/2013 Req'd Qty: 10.00

\*10\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

160

Green Sandtex(Ref:4.3.5.8) per QSI005 4.3

0.00

\*160\*

Powdercoat

Powder Coating

Memo

START TIME:

FINISH TIME:

OVEN TEMPERATURE:

10x p m / 13/08/06

170

QC3- Inspect Part Finish

0.00

\*170\*

QC

Quality Control

Memo

0.00

10x p m / 13/08/06

180

PURCHASING

0.00

\*180\*

Purchasing

Purchasing

Memo

SEND TO TALMAR FOR FOAM AND FABRIC

0.00

P/O. 20834

CL 13/08/07 (10)

m 111277

11:40  
3200F  
12:10

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

# Work Order ID 99966

\*99966\*

Tuesday, April 16, 2013 3:47:58 PM

Item ID: PB67-43001-267 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Pad Attachment Assembly  
 Start Date: 4/16/2013 Start Qty: 10.00 \*10\* Cust Item ID:  
 Required Date: 5/24/2013 Req'd Qty: 10.00 \*10\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
190 *190* Packaging Packaging	Receive & Inspect for Damage & Mat'l Certs  Memo	0.00  0.00							
200 *200* QC Quality Control	QC6- Inspect dimensions to drawing  Memo	0.00  0.00							
210 *210* Packaging Packaging	Identify as per dwg & Stock Location: _____  Memo	0.00  0.00							

DAS  
27  
9-89

13 & 30

10

43/4/29 (10)

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		



**Work Order ID 99966****\*99966\***

Page 5

Tuesday, April 16, 2013 3:47:58 PM

Item ID: PB67-43001-267

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Item Name: Pad Attachment Assembly

Stop **\*NS2\***

Start Date: 4/16/2013 Start Qty: 10.00

**\*10\***

Cust Item ID:

Required Date: 5/24/2013 Req'd Qty: 10.00

**\*10\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_

Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

220

QC21- Final Inspection - Work Order Release

0.00

**\*220\***

QC

Memo

0.00

Quality Control

13/9/30  
MC 13-0830

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>			
Doc/Data <input type="checkbox"/>												
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Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
<b>FAULT CATEGORY</b>												
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

# Picklist Print

Tuesday, April 16, 2013 3:47:58 PM

Page 1

Work Order ID: 99966  
 Parent Item: PB67-43001-267  
 Parent Item Name: Pad Attachment Assembly

Start Date: 4/16/2013 Required Date: 5/24/2013  
 Start Qty: 10.00 Required Qty: 10.00

Comments: IPP Rev:A 08-06-20 new issue DD verified by:ec IPP Rev B 10.10.04 per revC  
 dwg EC verified by:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M2024T3S.032 2024-T3 .032 sheet		Purchased	No			100	sf	634.4022	0.2566	2.7010526 3.0			Jmi3-07-30

Location	Loc Qty	Loc Code
MAT022	634.4022	
118243	32.4962	
118523	141	
121309	68.656	
123096	27.6	
123574	81.9	
124987	282.75	

124987

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

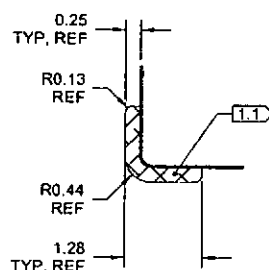
Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
--	---	---

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

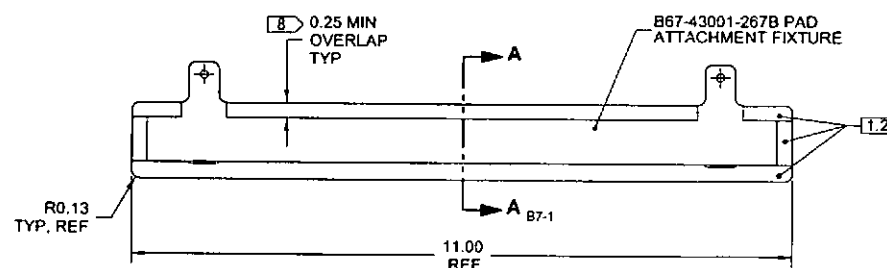
**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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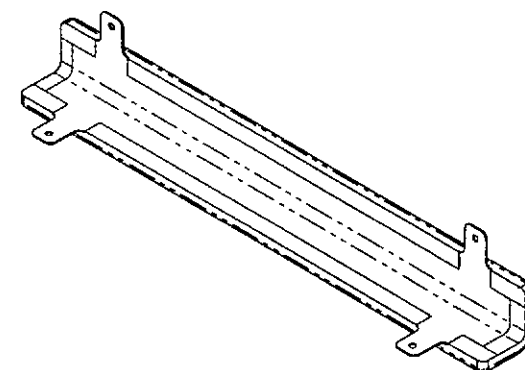
ITEM	QTY -267	P/N	DESCRIPTION
1	X	B67-43001-267	PAD ATTACHMENT ASSEMBLY
2	1	B67-43001-267B	PAD ATTACHMENT FIXTURE
3	A/R	1637-002	SEE NOTE 1.1
4	A/R	1495	SEE NOTE 1.2
5	A/R	LA4009	SEE NOTE 1.3



**SECTION A-A B5-1**



**B67-43001-267 PAD ASSEMBLY**



**NOTES:**

**1) MATERIAL:**

1.1) FOAM: ETHYLENE PROPYLENE NEOPRENE SBR CLOSED-CELL, FLAME RETARDANT, 0.125 THICK, PER ASTM D1056 2A2, SERVICE TEMP -40°F TO +200°F, COLOUR: BLACK  
REF: TULMAR P/N 1637-002

NOTE: FOAM MAY BE LAYERED AND BONDED TO 0.25 THICKNESS USING TULMAR P/N 1495 ADHESIVE  
1.2) FABRIC: 100% 420 DENIER NYLON, MIN THREAD COUNT 35X35, POLYURETHANE COATED ONE SIDE, COLOUR: BLACK  
REF: TULMAR P/N 1495

1.3) ADHESIVE: URETHANE WITH CATALYST, TWO PART, CLIFTON LA4009

2) FINISH: BOND NEOPRENE TO COVER PLATE USING ADHESIVE. COVER WITH DENIER AS SHOWN.

3) TOLERANCES: PER TABLE 1 (ZN A3-1) UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: N/A


6) IDENTIFICATION: N/A

7) WEIGHT: 0.17 lbs REF

8) DENIER NYLON TO BE BONDED ALL AROUND INNER SIDES OF PLATE

**TABLE 1 3**

TOLERANCES ON FABRIC (PARTS AND ASSEMBLIES)
±1/8: DIMS <2
±1/4: DIMS 2 TO <10
±1/2: DIMS 10 TO <20
±5/8: DIMS 20 TO <40
±1.5%: DIMS EQUAL TO OR > 40

C	REDRAWN PREMIER AVIATION DRAWING IAW DART OSI 018, OSI 043 AND TULMAR SAFETY SYSTEMS INC.'S MANUFACTURING PROCESS AND TOLERANCES ON FABRIC. FOR PREVIOUS REVISIONS, REFER TO SHEETS 14 AND 34 OF PREMIER AVIATION DRAWING No. B67-43001. REASON: SEE PAR#09-011.		MD	10.04.27
REV.	DESCRIPTION		BY	DATE
DESIGN	RW		<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA  DRAWING NO <b>B67-43001-267</b>  TITLE <b>PAD ASSEMBLY</b>  SCALE NTS  COPYRIGHT © 1995 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR DISCLOSED TO ANY OTHER PERSON WITHOUT THE WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	
DRAWN				
CHECKED				
MFG. APPR.				
APPROVED				
DE APPR.	N/A			
DATE	10.04.27			

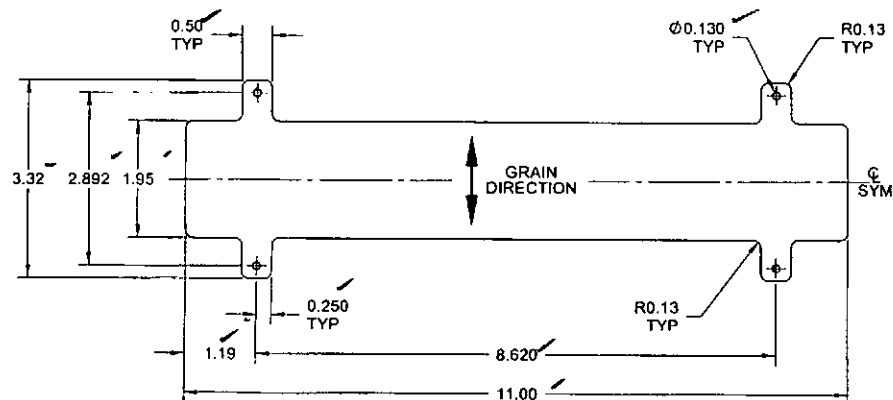
**RELEASED**  
2010-09-15



8 7 6 5 4 3 2 1

D

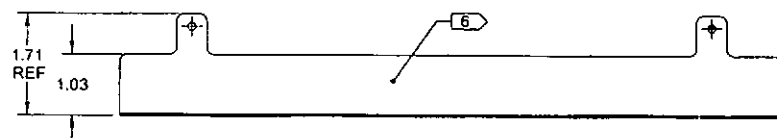
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**B67-43001-267F FLAT PATTERN** (1)

C

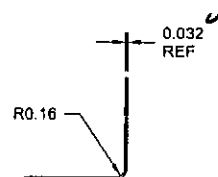
C



**B67-43001-267B BENDING DETAIL** (2)  
(MAKE FROM B67-43001-267F)

B

B






**NOTES:**

- 1) MATERIAL: 2024-T3 ALUMINUM SHEET, 0.032 THICK  
PER AMS-QQ-A-250/4 OR AMS 4037 OR ASTM B209  
REF. DART SPEC. M2024T3S.032
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
POWDER COAT GREEN SANDEX (4.3.5.8) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "B67-43001-267B" AND B/N "BXXXXX" USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: 0.07 lbs

A

A

**RELEASE**  
2010-09-16 U

DESIGN	R/W	<b>DART AEROSPACE LTD</b>	
DRAWN	5	HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. C
MFG. APPR.		<b>B67-43001-267</b>	SHEET 2 OF 2
APPROVED		TITLE	SCALE
DE APPR.	N/A	<b>PAD ASSEMBLY</b>	NTS
DATE	10.04.27	COPYRIGHT © 1993 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PROPRIETARY AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY FORM OR BY ANY MEANS WITHOUT THE WRITTEN PERMISSION OF DART AEROSPACE LTD.</small>	

8 7 6 5 4 3 2 1









# PACKING SLIP

# TULMAR

Tulmar Safety Systems Inc.  
1123 Cameron Street  
Hawkesbury, ON K6A 2B8 CA  
Tel: 613-632-1282  
Fax: 613-632-2030  
MID : XOTULSAF1123HAW  
email: info@tulmar.com

Packing Slip No.  
**49135**  
Ship Date  
29-Aug-13

**Bill To:**

**Dart Aerospace**  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7. Canada

**Ship to:**

**Dart Aerospace**  
1270 Aberdeen Street  
Tel: 613-632-9577  
Att: Chantal Lavoie  
Hawkesbury, ON K6A 1K7. Canada

Order number	Sales order date	Account number	Account manager
30773	8-Aug-13	CDART100	Helena Vandeweerd
PO number	Ship Via	Shipping Terms	
PO20834	Pick-Up	FOB HAWKESBURY	
Item No.	Quantity ordered	UOM	Qty Shipped/Returned
Description			Quantity on back order

Drawing No: B67-43001-173  
DWG Rev: C  
ref 99994

**Lot No:** BATCH0000000009 Qty: 16  
Priority Rating: LN 6

8421-103	6	EA	6
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Cover Plate/

Drawing No: B67-43001-181  
DWG Rev: C  
ref 99991

**Lot No:** BATCH0000000008 Qty: 6  
Priority Rating: LN 7

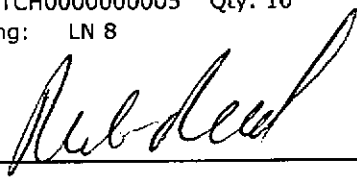
8421-108	10	EA	10
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Dart Blade Fold Kit - Pad #9/

Drawing No: (Ref B67-43001-267 Rev B1)  
DWG Rev: NR  
ref 99966

**Lot No:** BATCH0000000005 Qty: 10  
Priority Rating: LN 8

Shipper



Date:

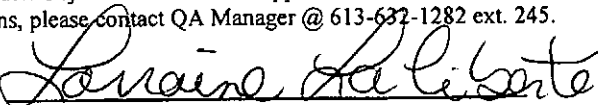
AUG 29 2013

**Certificate of Conformance**

☒ See Certification Enclosed

I hereby certify that the items listed hereon have been inspected, and / or tested (as applicable), conform to all specifications and requirements detailed in the contract or purchase order. Objective evidence to support this statement is on file, and can be made available upon request.  
If any questions or concerns, please contact QA Manager @ 613-632-1282 ext. 245.

Authorized Inspector



Date:

AUG 29 2013





# J. ENNIS FABRICS

June 3, 2013

Fax To: Tulmar Safety Systems  
 Fax: 613-632-2030  
 Attention: Meagan

## Certificate of Conformance

Re: PO 25470-00 for Oxford 7 Black

The goods shipped on P/O 25470-00 are as per sampled goods. Specification as follows:  
 As per mill documentation:

**Oxford 7 Black** is in compliance with the following standards:

**Width:** Product is 56 Inches Wide.

**Roll Size:** Average Roll Length is 75 Yards.

**Weight:** Product Weight is 6.79 Ounces per Sq.Yd. /Product Weight is 10.94 oz per Lin.Yd

**Content:** 100% Nylon

**Coating:** Product has a Polyurethane Coating {approximately 0.65 oz/ Sq.Yd. (18.5g/sq.yd.)}

**Denier:** Yarn is 420 Denier.

**Thread Count:** Construction is 62 x 38 Threads per Square Inch

**Protective Finish:** Product is Water Repellent.

**Hydro Resist:** AATCC 127 (Suter): Average 800 mm

**Piece # 108200403 Manufacture Date:** 11/01/12, **Lot Number:** 416704

**Piece # 108220781 Manufacture Date:** 11/09/12, **Lot Number:** 415998

**Piece # 108349846 Manufacture Date:** 01/03/13, **Lot Number:** 417612

**Piece # 108349853 Manufacture Date:** 01/03/13, **Lot Number:** 417512

Sincerely,  
 J. Ennis Fabrics Ltd.

*S. Nolan*

Susan Nolan  
 Customer Service Bilingual Specialist

c/c used to mfg. B 67-43001-85 (8421-102)  
 B 67-43001-83 (8421-101)  
 B 67-43001-267 (8421-108)  
 B 67-43001-35 (8421-109)  
 B 67-43001-69 (8421-69)  
 B 67-43001-181 (8421-103)  
 B 67-43001-172 (8421-104)

#  
 TSS 1495/27 (82)



C/E used to mfg: B67-43001-33/173/181/69/35/267/83/85  
755 842.1-107/104/103/106/109/108/101/102

Lennette



# ROYAL

## ADHESIVES & SEALANTS, LLC

Aerospace & Marine Inflatable Adhesives & Coatings Division

Date: 4/16/13

LA4009

Shipper #: 23363

### Certificate of Compliance

This letter certifies that 110 x 1 gallon cans of LA4009 Polyurethane Adhesive,

\*\*Drawing No: (Ref 10557979)

lot number: 13-087 was shipped to you on 4/16/13. \*\*DWG REV: "A" Royal Adhesive & Sealants,

LLC - Aerospace & Marine Inflatable Adhesives & Coatings Division manufactured this material

according to internal specifications which include quality control and assurance procedures. The material

was manufactured on 3/28/13 against your Purchase Order # 25083-00.

Shelf Life: 1 year from date of manufacture

Expiration Date: 3/28/14

This letter certifies that 19 x quart cans of CATUV Accelerator, Lot number 13-087 was shipped to you

on 4/16/13. Royal Adhesive & Sealants, LLC - Aerospace & Marine Inflatable Adhesives & Coatings

Division manufactured this material according to internal specifications which include quality control

and assurance procedures. The material was manufactured on 3/28/13 against your Purchase Order #

25083-00.

Shelf Life: 1 year from date of manufacture

Expiration Date: 3/28/14

Sincerely,

*Dan Constantino*

Daniel Constantino

Quality Assurance Mgr/ISO Coordinator

BS 7122/57

Royal Adhesives & Sealants, LLC - Aerospace & Marine Inflatable Adhesives & Coatings Division  
48 Burgess Place - Wayne, New Jersey 07470 Phone: 973-694-0845 Fax: 973-694-5678

